



**HAWAII STATE ETHICS COMMISSION  
ORGANIZATION'S OR INDIVIDUAL'S EXPENDITURES  
AND CONTRIBUTIONS REPORT**

(To be filed by organizations, employing organizations and individuals  
other than registered lobbyists)

**FORM ORG**

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HAWAII STATE ETHICS COMMISSION  
1001 Bishop Street, ASB Tower Suite 970  
Honolulu, Hawaii 96813  
(P.O. Box 616, Honolulu, Hawaii 96809)  
Telephone: (808) 587-0460  
Fax: (808) 587-0470  
email: [ethics@hawaiiethics.org](mailto:ethics@hawaiiethics.org)  
web site: [www.hawaii.gov/ethics](http://www.hawaii.gov/ethics)

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STATE OF HAWAII  
STATE ETHICS COMMISSION

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For lobbying reporting period:	Contact person	<u>David W. Rae</u>	Phone	<u>(808) 674-3117</u>
[ ] January 1 - last day of February	Organization	<u>The Estate of James Campbell</u>		
[ ] March 1 - April 30	Mailing Address	<u>1001 Kamokila Blvd.</u>		
[✓] May 1 - December 31		<u>Kapolei, HI 96707</u>		
Year of Report <u>2005</u>				

**PART I. TOTAL EXPENDITURES**

The total sum or value of all expenditures for the purpose of lobbying during the statement  
period was: \$ 2,575.60

**EXPENDITURES**

Category	Total Amount	Category	Total Amount
1. Preparation & distribution of lobbying materials		7. Entertainment	\$294.31
2. Media advertising		8. Food & beverages	\$243.57
3. Telegraph, telephone and other forms of telecommunication		9. Gifts	\$37.72
4. Postage		10. Loans	
5. Compensation paid to lobbyists	\$2,000.00	11. Other disbursements	
6. Fees (other than to lobbyists)		TOTAL EXPENDITURES	2,575.60

**COMPENSATION PAID TO LOBBYISTS**

List in this section the names of all lobbyists and compensation paid to the lobbyists during the statement period.

Name	Address	Compensation paid
David W. Rae	1001 Kamokila Blvd.; Kapolei, HI 96707	\$ 0.00
Robert H. Taniguchi	Same as above	\$ 0.00
Clarence M. Kido	Same as above	\$2,000.00

## EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY

List in this section all expenditures incurred for the purpose of lobbying of \$25 or more per person per day during the statement period.

☒ This section is not applicable

☐ Expenditures incurred in the total sum of \$25 or more per person per day were made for the following persons:

Name & Address	Amount or value

## AGGREGATE EXPENDITURES OF \$150 OR MORE PER PERSON

List in this section all expenditures incurred for the purpose of lobbying in the total sum of \$150 or more per person during the statement period.

☒ This section is not applicable

☐ Expenditures incurred in the aggregate of \$150 or more per person were made for the following persons:

Name & Address	Amount or value

## PART II. CONTRIBUTIONS RECEIVED

List in this section all contributions received for the purpose of lobbying in the total sum of \$25 or more per person during the statement period.

☒ This section is not applicable

☐ Contributions received in the total sum of \$25 or more per person were received from the following persons:

Name & Address	Amount or value

## PART III. SUBJECT AREAS OF LOBBYING

Legislative and/or administrative action in the following areas was supported or opposed during the statement period:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> Agriculture                              | <input checked="" type="checkbox"/> Education                      | <input type="checkbox"/> Human Services  | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities                   | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input checked="" type="checkbox"/> Tourism & Recreation                       |
| <input type="checkbox"/> Consumer Protection & Commerce                      | <input checked="" type="checkbox"/> Hawaiian Affairs               | <input type="checkbox"/> Labor & Employment  | <input checked="" type="checkbox"/> Transportation                             |
| <input checked="" type="checkbox"/> Culture, Arts, Historic Preservation     | <input type="checkbox"/> Health                                    | <input checked="" type="checkbox"/> Planning, Land & Water Use Management              | <input type="checkbox"/> Other: (indicate below)                               |
| <input checked="" type="checkbox"/> Ecology, Energy Environmental Protection | <input checked="" type="checkbox"/> Housing                        | <input type="checkbox"/> Public Safety & Corrections                                   |  |

I hereby certify that the statements made above are correct and complete to the best of my knowledge

(Signature of authorized person)

(Date)

Name of authorized person (type or print) **Stephen H. MacMillan**

Title of authorized person **Chief Executive Officer**